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EMERGENCY INTERNATIONAL ASSISTANCE FOR PEACE, NORMALCY AND RECONSTRUCTION OF WAR-STRICKEN AFGHANISTAN

Report of the Secretary-General

1. The present report is submitted in pursuance of General Assembly resolution 47/119, which was adopted without a vote on 18 December 1992. In that resolution, the Assembly requested the Secretary-General:

(a) To ensure the continued operation and further strengthening of humanitarian and economic programmes for Afghanistan;

(b) To dispatch, as soon as possible, a team of experts to evaluate the situation in Afghanistan in the light of the war damage and destruction and to prepare a comprehensive report, in cooperation with the Government of Afghanistan, on requirements for the rehabilitation and reconstruction of Afghanistan;

(c) To initiate a plan for mobilizing financial, technical and material assistance, including the convening of a conference of donor States and international financial institutions.

2. The Assembly also requested the Secretary-General to continue to monitor the overall situation in Afghanistan and make available his good offices.

3. The Assembly further requested the Secretary-General to submit to it at its forty-eighth session a report on the progress made in the implementation of the resolution. The present report is submitted in accordance with that request.

I. EMERGENCY HUMANITARIAN ASSISTANCE FOR AFGHANISTAN

A. Consolidated appeals and coordination of assistance

4. As reported to the General Assembly at its forty-seventh session, on 5 June 1992, I launched a consolidated appeal requesting donors to contribute US$ 179.7 million to meet the emergency humanitarian needs of Afghanistan for the period June-December 1992. The humanitarian and economic assistance programmes included in that appeal were coordinated by the Office for the Coordination of United Nations Humanitarian and Economic Programmes relating to Afghanistan (UNOCA).

5. On 25 August 1992, a note on immediate needs in Afghanistan was issued by the Under-Secretary-General for Humanitarian Affairs. The note requested US$ 10 million, within the context of the 5 June consolidated appeal, for the urgent relief activities necessitated by the outbreak of hostilities in Kabul. It was prepared by Mr. Sotirios Mousouris, my Personal Representative in Afghanistan and Pakistan, in consultation with the authorities of the Government of Afghanistan, the relevant United Nations agencies and non-governmental organizations (NGOs).

6. Although some funds were received following the 25 August note, as winter approached, the overall response of donors to the 5 June appeal remained poor. On 1 November 1992, the Under-Secretary-General for Humanitarian Affairs issued a note on the winter emergency needs of Afghanistan, drawing attention to the specific and urgent requirements related to food, fuel and shelter supplies for programmes for vulnerable populations during the winter months. These requirements amounted to $17.6 million and were sought within the context of the 5 June consolidated appeal. As at 31 December 1992, Governments had pledged or contributed US$ 85.2 million towards the $179.7 million requested in the 5 June 1992 consolidated appeal, or slightly less than half the amount sought.

7. In view of the changed circumstances in Afghanistan, I decided that the existing arrangements for coordination required revision. Accordingly, on 1 January 1993, the name, mandate and structure of UNOCA were changed. As of that date, the United Nations Office for the Coordination of Humanitarian Assistance to Afghanistan (UNOCHA), operating under the overall auspices of the Department of Humanitarian Affairs, has been charged with coordination of humanitarian programmes. Mr. Mousouris also became the Coordinator of Humanitarian Assistance to Afghanistan, and head of UNOCHA. The mandate of UNOCHA is as follows:

(a) To act, on behalf of the Under-Secretary-General for Humanitarian Affairs, as the central coordinating office for the various components of the humanitarian assistance programmes undertaken within the United Nations system;

(b) To undertake consultations regarding the coordinated humanitarian assistance to Afghanistan with the Government of Afghanistan and with neighbouring and other concerned States, on behalf of the United Nations system;

(c) To secure, through all appropriate channels, access of humanitarian assistance to affected populations and communities, and the protection of humanitarian personnel and supplies;

(d) To direct and organize special tasks not within the mandate of any particular United Nations agency or programme (such as mine clearance and mine awareness);

(e) To provide coordination of logistical and other services to United Nations agencies working in Afghanistan, including local coordination services, through its field presence in the main regional cities in Afghanistan;

(f) To prepare, with the cooperation of the United Nations agencies concerned, consolidated inter-agency appeals, action plans, reports and other documents;

(g) To ensure effective liaison between United Nations agencies and the representatives of donor Governments and NGOs participating in humanitarian assistance activities, and promote donor support for United Nations humanitarian assistance programmes;

(h) To ensure a smooth transition from humanitarian relief to rehabilitation and reconstruction.

8. In January 1993, I launched an updated consolidated appeal for emergency humanitarian assistance for Afghanistan (January-September 1993), urging the international community to make available US$ 138.2 million in support of "life-sustaining" activities in the sectors of mine clearance, voluntary repatriation, food aid, health, water supply and sanitation, emergency agricultural inputs and relief management support. As at 15 August, a total of US$ 45.89 million had been pledged or contributed towards this appeal.

9. At the same time, initial rehabilitation work, supported by United Nations Development Programme (UNDP) indicative planning figure (IPF) funds and resources from other regular programmes of the United Nations agencies, has continued in a manner complementary to the objectives of the humanitarian programmes contained in the appeal. This work is expanding in areas of the country not directly affected by the humanitarian emergency and particular emphasis is placed on the potential return of refugees.

10. On 22 June 1993, with only three months remaining in the current appeal period, the Under-Secretary-General for Humanitarian Affairs issued a note on current humanitarian needs in Afghanistan. This note indicated the outstanding needs, taking into account recent developments affecting the implementation of the humanitarian programmes contained in the appeal. In particular, although the January 1993 appeal called for $138.2 million, it was based upon the assumption that some 2 million refugees would be returning from neighbouring States in 1993. In the event, however, it became evident that less than this number would return, owing, in part, to continued insecurity in areas to which return was expected. The projected number of returning refugees was hence reduced to 1.3 million. This reduction enabled a corresponding reduction in the overall programme requirements for the appeal period from US$ 138.2 million to $112.6 million. The outstanding requirements for the remainder of the appeal period, as at 15 August 1993, were therefore US$ 66.7 million.

1. Security considerations

11. Security of United Nations staff working in Afghanistan remains a major concern. On 1 February 1993, three United Nations officials (one United Kingdom and two Afghan nationals) and an engineer from the Netherlands who was accompanying them were assassinated on the road near Jalalabad. Following this incident, UNOCHA led a detailed inter-agency review of operating methods in the light of security conditions. A short-term strategy was developed, in collaboration with the United Nations Designated Official for Security, to maintain and strengthen the United Nations international presence in areas of the country which continued to be safe, while continuing delivery of assistance to other areas, where possible, with the help of national staff and NGOs.

12. Following the serious hostilities in Kabul which forced the evacuation of all United Nations international staff from the city in August 1992, more than 50 short missions, particularly late in 1992 and again in the spring of 1993, flew to Kabul to monitor the distribution of emergency humanitarian assistance and to identify the needs of the most vulnerable groups in the city. In mid-July 1993, the lull in fighting enabled the United Nations to deploy a small number of international staff on a continuous rotating basis. It is hoped that conditions will soon improve sufficiently to allow the full re-establishment of the United Nations international staff presence in Kabul. Throughout this period, United Nations international staff were present on a permanent basis in Herat and Mazar-i-Sharif, while missions to other cities and rural areas were undertaken on a regular basis.

13. UNOCHA has continued to coordinate the humanitarian assistance programme from its temporary headquarters in Islamabad, Pakistan. UNOCHA field officers have continued their activities in Afghanistan in Herat, Mazar-i-Sharif, Kandahar, Bamyan and other locations, as security has allowed.

B. Implementation of humanitarian programmes, by sector

1. Mine clearance programme

14. The presence of land mines is one of the greatest obstacles to the successful return of the refugees. The large-scale return of refugees in 1992, and the fact that many of them returned to areas affected by mines, has made the need to expand demining activities more urgent than ever before. Statistics available from the International Committee of the Red Cross (ICRC) hospitals for the war-wounded show a marked and tragic increase in mine injuries and indicate that the overwhelming majority of the Afghans brought into their hospitals as a result of such injuries were returnees. The United Nations High Commissioner for Refugees (UNHCR) estimates that an increasing proportion of those refugees who had indicated their willingness to return from neighbouring countries is reluctant to do so because it is known that the areas to which they wish to return are mined.

15. During the period under review, the UNOCHA mine-clearance programme continued uninterrupted in Afghanistan, despite security problems and harsh weather conditions. The programme includes components for mine-awareness training, mine-clearance training, minefield surveys and mine clearance. From

1 January to 31 July 1993, mine-awareness training reached 171,353 men and women in 6 provinces, bringing the total number of persons reached by the mine-awareness programme to over 1,112,891 since its inception five years ago. During the past year, almost 2,000 trained Afghan mine clearers were employed in the mine-clearance programme, clearing unexploded ordnance from access roads, villages, irrigation canals and agricultural land. A nation-wide survey was also started, to identify more accurately the areas in Afghanistan affected by mines. Instructors from the Australian Army and qualified Afghan instructors conducted 37 mine-clearance training or revision courses, involving 887 students. As at 31 July, 4.26 million square metres of priority area in 15 provinces had been cleared, and 4.78 million square metres of land in 12 provinces had been marked and surveyed.

16. The January appeal identified a total requirement of US$ 15 million for mine clearance. As at 15 August, US$ 12.4 million had been made available. The remaining US$ 3.6 million was needed immediately to enable operations to continue. The UNOCHA mine-clearance programme has faced problems related both to insufficient funding levels and to lack of continuous funding. Commitments totalling US$ 20 million annually will be required to enable the completion of urgently needed clearance of priority areas within three years under an expanded intensive programme.

2. Voluntary return of the refugees

17. The unprecedented scale of refugee return witnessed in 1992 demonstrated the high degree of determination of Afghans to return home as soon as conditions permitted and their remarkable ability to rebuild their lives in even the most difficult circumstances. Many of those who return in 1993, however, face greater difficulties than those who repatriated the year before, as they increasingly return to areas where major problems will be posed by the presence of mines, slow reactivation of the local economies and lack of progress in the rehabilitation of essential services, especially irrigation, as well as land-tenure disputes. UNHCR, with the support of other United Nations agencies, has been providing assistance to returnee communities through a variety of quick-impact projects designed to meet the most urgent needs at the community level.

18. UNHCR field staff regularly monitored the estimated population of refugee villages and conducted surveys regarding repatriation movements, as well as reasons for not wishing to repatriate. Surveys in early 1993 indicated increased pessimism among the refugees, many of whom, having earlier declared their intention to repatriate, decided to postpone their actual movement. While at the beginning of 1993 UNHCR had projected that, subject to stable security conditions prevailing in Afghanistan, as many as 2 million refugees might return home in the course of the year, continued fighting in Kabul, as well as unrest and insecurity in some other areas, has deterred many refugees from returning. As a result, in June, UNHCR revised its projection to 700,000 returnees from the Islamic Republic of Iran and 600,000 from Pakistan in 1993. It is possible that the actual number of returnees may be lower than even this projection.

19. The voluntary return of refugees from Pakistan continued to be facilitated by the UNHCR/World Food Programme (WFP) repatriation grant programme. In

December 1992, a programme for providing direct assistance to refugees crossing into Afghanistan from the Islamic Republic of Iran was established. As at 31 July, 89,063 refugees had cashed their ration cards in Pakistan and 149,513 refugees had received the repatriation grant at the Islamic Republic of Iran/Afghanistan border.

20. The first meeting of the Tripartite Commission, comprising the Governments of Afghanistan and the Islamic Republic of Iran and UNHCR, met in Tehran on 13 May 1993 and discussed issues such as voluntariness of return and rights of refugees to bring back their possessions. Operational matters, such as transportation, border crossing points and repatriation grant, were also discussed and a permanent working group was established. As of 16 July, the signing of the tripartite agreement between the Governments of Afghanistan and Pakistan and UNHCR had not yet taken place.

21. In May 1993, the Government of Pakistan decided in principle to allow returnees proceeding to Afghanistan from the Islamic Republic of Iran to transit through Baluchistan. This was expected to accelerate the rate of repatriation from the Islamic Republic of Iran, once the border exit station had been opened and modalities of transport and repatriation-grant distribution agreed.

22. By the end of July 1993, the International Organization for Migration had assisted the subsidized repatriation of over 15,197 persons from Pakistan and 28,732 returnees from the Islamic Republic of Iran.

23. In the appeal of January 1993, UNHCR foresaw total requirements for its programme in 1993 of US$ 75.5 million. Of that amount, US$ 49.5 million was for direct assistance to the projected 2 million returnees leaving the Islamic Republic of Iran and of Pakistan. The revised requirements, based on the reduced projection of 1.3 million returnees, are for US$ 59.9 million, of which US$ 38.5 million would be for direct assistance to those returning. As at 30 June, US$ 24.6 million had been made available for UNHCR activities.

3. Food assistance

24. In mid-September, the High Commissioner visited the Islamic Republic of Iran, Pakistan and Afghanistan.

25. In Afghanistan, WFP provides food assistance through four main types of project activity: food-for-work, emergency feeding, vulnerable group feeding and market sales. Through food-for-work, WFP supported various rehabilitation activities, such as repair and construction of roads, cleaning and repair of irrigation canals, recovery of agricultural land from disuse and rebuilding of public institutions undertaken mostly by the rural communities. Under the emergency feeding programme, WFP provided food to about 126,000 internally displaced persons located in Kabul, Jalalabad, Mazar-i-Sharif, Pul-i-Khumri and Shebergan and to 60,000 Tajik refugees in northern Afghanistan.

26. Further, WFP provided food aid to support bakeries through municipalities in order to produce bread ("naan"), and sell it to the targeted poorest populations at highly subsidized prices. No market sale was undertaken because of insecurity in the country and absence of any banking facilities.

27. WFP planned to deliver 131,880 tons of food aid during the first 9 months of 1993. In the first part of the year, deliveries to several locations, particularly Kabul and Kandahar, were below the targets, owing to unsatisfactory security conditions in those cities and on the access roads. As at 30 June, 36,410 tons had been utilized for projects inside Afghanistan. Similarly, WFP had projected a need for 68,600 tons of food for the repatriation grant programme in Pakistan and 44,000 tons for the Islamic Republic of Iran. However, as at 30 June, only 3,803 tons had been required for distribution under this programme in Pakistan and 4,313 tons in the Islamic Republic of Iran. An increase in the requirements for feeding in the refugee camps corresponds to the reduction in the rate of repatriation.

28. In the appeal, WFP projected total requirements of US$ 79.3 million for the food aid sector. As at 30 June, resources in cash and in kind, with a total value of US$ 46 million, were available against a revised requirement of US$ 63.9 million. An additional US$ 17.9 million would be required if 1.3 million refugees return from the Islamic Republic of Iran and Pakistan, as currently projected.

4. Health, water supply and sanitation

29. As a result of the continued fighting, 1992 witnessed the almost complete collapse of the health infrastructure in Afghanistan. By the middle of the year, medicines and basic health supplies were depleted and access to food supplies, particularly for vulnerable groups, became difficult in urban areas. The large influx of returnees placed enormous strain on the already overburdened health services.

30. Delivery of planned assistance in the health sector was constrained by the security situation in Afghanistan. Particularly in the health field, limitations on counterpart capacity due to security problems restricted the absorptive capacity of health institutions, many of which were either closed or severely understaffed.

31. In June 1993, World Health Organization (WHO) offices in Kabul, Kandahar and Faizabad reported a high incidence of diarrhoeal diseases, diagnosed as cholera, in these areas. The cholera epidemic spread rapidly throughout the country. In less than 6 weeks, 21 out of the 29 provinces reported outbreaks. In Badakhshan province, the case fatality rate reached 30 per cent. On 10 July 1993, the Ministry of Public Health officially declared the outbreak of cholera in Afghanistan and requested assistance from international, as well as bilateral, donor agencies. The total number of cases reported by the Ministry of Public Health at 15 August was 21,404, of which 726 had resulted in death.

32. Following the outbreak of cholera, the Coordinator established a United Nations task force, comprising WHO, the United Nations Children's Fund (UNICEF) and other agencies, responsible for taking joint action to address the problem. WHO and UNICEF, in cooperation with the Ministry of Public Health, started the chlorination of wells in the affected areas, along with a mass awareness campaign through the local media. Large quantities of medical supplies for the treatment of cholera were also dispatched by WHO and UNICEF to the various locations. UNHCR dispatched large tents to be used in hospitals in Kabul. In

the January appeal, funds totalling US$ 2 million were also sought to enable the UNDP/Office for Project Services to carry out emergency repairs to the urban water supply systems in several Afghan cities; however, as at 15 August, there had been no donor response to this request. In the meantime, UNDP provided assistance with IPF funds for engineering services, which restored the piped water supply to 300,000 people in August 1993. The United Nations Centre for Human Settlements (Habitat) (UNCHS) has provided assistance for waste disposal, as well as temporary shelter, under a UNDP-funded project.

33. In the light of developments, both WHO and UNICEF have been obliged to devote more of their resources towards the provision of emergency medical assistance than foreseen, with a consequent reduction in other activities. As at 30 June, neither agency had received contributions in 1993 towards the requirements described in the appeal. Both agencies therefore still required all the funds requested in the appeal, namely US$ 2.1 million for UNICEF and US$ 8.3 million for WHO, to enable them to continue to support the rehabilitation of hospitals and health centres, strengthen casualty units, control infectious diseases and provide in-service training, health education, emergency medical assistance and water and sanitation.

5. Agriculture

34. The revival of agriculture in Afghanistan is the key to the successful resettlement of returning refugees and displaced persons. The Food and Agriculture Organization of the United Nations (FAO) and the UNDP Office for Project Services have continued to carry out a nation-wide agricultural rehabilitation programme, through numerous small-scale community-focused projects. These are considered to be essential for providing stability and thus reducing further population movements and alleviating humanitarian stress.

35. In the early part of 1993, FAO completed deliveries of emergency agricultural inputs under the 1992-93 programme. A total of 4,513 tons of seed and fertilizer, 100,000 forest trees and 300,000 budded fruit trees were delivered in 25 provinces under this programme.

36. As at 15 August, only US$ 500,000 had been made available against the US$ 4.5 million requested in the January appeal for the FAO seed and fertilizer programme. FAO therefore still requires US$ 4 million to enable it to complete procurement of the necessary agricultural inputs.

6. Drug control activities

37. With the return of large numbers of refugees and the stagnant economy, the growing of illicit crops, particularly the opium poppy, is a problem of increasing magnitude in Afghanistan. With its present estimated production level, Afghanistan is probably the major opium-producing country in the world. There is evidence that drug trafficking and drug abuse have also increased. The urgent need for drug-control programmes is thus highlighted as a key issue requiring early address in the context of the relief to development continuum. The activities of the United Nations International Drug Control Programme (UNDCP) were initiated in Afghanistan under Operation Salam and have continued

to be implemented in accordance with an integrated development approach, whereby recipient communities are assisted to become increasingly responsible for drug control activities undertaken in their own areas.

C. Implementation of humanitarian programmes, by region

1. The situation in Kabul

38. While in many parts of Afghanistan reasonably peaceful conditions have prevailed this past year, in Kabul recurrent and sometimes intense fighting and shelling has affected the functioning of the central Government and created new and grave humanitarian problems. Owing to a blockade of the city and frequent rocketing, the United Nations was unable, for long periods in 1993, to send food to the city, although it succeeded on several occasions in delivering medical supplies, often by air. During the hostilities, thousands of people were killed, many more injured, and countless buildings destroyed. In addition to the heavy civilian casualties, more people were displaced from their homes, thus increasing the need for immediate relief assistance. Several hundred thousands of the refugees who had intended to return to Kabul in 1993 delayed their plans.

39. The municipal authorities in Kabul estimate that as many as 600,000 may have been displaced from their homes in Kabul since August 1992. Of these, up to 400,000 may have left the city for other destinations inside the country, notably Jalalabad, Mazar-i-Sharif, and surrounding areas, or may have left for neighbouring countries. Of the 200,000 people who moved to other parts of Kabul, most live with relatives or friends, often in extremely over-crowded conditions. Up to 40,000 are living in public buildings, such as schools, mosques and unfinished buildings, often with no water or sanitation. The United Nations, the ICRC and a few international and Afghan NGOs based in Kabul have been providing emergency food aid, shelter materials, water and sanitation, and medical care. In addition, assistance is being provided to some 22,000 of the displaced persons from Kabul in Jalalabad and another 28,000 in the northern provinces, particularly in Mazar-i-Sharif.

40. During the past year, Kabul has suffered for long periods from complete breakdowns of electricity and water supply. Food shortages in the city became more acute as a result of the recurring blockades. However, after persistent efforts by UNOCHA to obtain assurances of security for the shipment of United Nations supplies, WFP has dispatched several hundred tons of food since the end of May 1993. In August, for the first time, convoys of United Nations trucks reached Kabul unhindered, with the cooperation of the authorities.

41. The high number of casualties resulting from the continuing hostilities placed additional strain on the already severely overburdened health services. WHO and UNICEF assisted with medical supplies and equipment, chlorination of water supplies and sanitation for displaced persons, as well as food and fuel needs. UNCHS has managed the emergency shelter programme.

42. On 15 June, Kabul was struck by a serious mud slide, in which more than 80 people lost their lives and as many as 1,000 were rendered homeless. The following day, a United Nations inter-agency team visited the site and immediate

arrangements were made for shelter material to be distributed. Food-for-work activities were initiated to support the clearance of the devastated areas.

2. The situation in other parts of the country

43. Western Afghanistan enjoyed relative stability, good security in Herat province and more effective local government counterparts than in other regions of the country. None the less, limits on the number of international staff which the United Nations was able to deploy in the region, for security and logistical reasons, placed some constraints on the level of activities that was possible. Mine-clearance priority in this region is being given to activities in Herat city (perhaps one of the most heavily mined cities in the world), Zindajan and Farah city.

44. The region, and particularly the city of Herat, was the focus for the repatriation of refugees from the Islamic Republic of Iran. As part of the assistance programmes for returnee communities, UNHCR activities addressed needs for shelter, potable water, irrigation and road repair. WFP provided food aid through food-for-work, vulnerable group and institutional feeding, emergency food aid and repatriation programmes. The Herat provincial hospital benefited from WHO and UNICEF assistance with laboratory equipment and medical supplies, and UNDP/Office for Project Services assistance to restore its water and power supplies. Similar WHO and UNICEF assistance was provided to 10 health centres and to provincial hospitals in Badghis and Ghor. UNICEF also dug wells in schools, hospitals and health centres and undertook a waste disposal project in Herat city.

45. Good security prevailed in northern Afghanistan for most of the period, particularly in the north-west, although constraints remained regarding the number of United Nations international staff that could be deployed. The immediate needs of many thousands of displaced persons from Kabul and of some 60,000 refugees from Tajikistan were the focus of attention of activities in this region, thus limiting the level of activity possible in favour of the resident population and returning refugees. Nevertheless, good progress was made in the sectors of health, nutrition and sanitation. Work on rural water supply and irrigation increased markedly.

46. The emergency assistance activities for the Tajik refugees were coordinated by UNHCR, which also provided local coordination of assistance to the internally displaced in northern Afghanistan. During the first part of 1993, weather conditions in the area were not suitable for the planned mine clearance of priority sites in Baghlan, Badakhshan and Takhar. WFP assistance in Baghlan, Balkh, Faryab, Jowzjan, Kunduz and Samangan provinces included food aid programmes for Tajik refugees and for displaced persons from Kabul, subsidized bread programmes, institutional feeding and food-for-work projects. WHO supplied essential drugs and equipment to provincial hospitals in Badakhshan and Balkh and 15 health centres, and provided medical training. UNICEF also assisted provincial hospitals and health centres and focused attention on primary health care facilities and immunization programmes. Repair and installation of pumps, wells and sanitary facilities were also undertaken by UNICEF. UNDP/Office for Project Services has also undertaken water supply and

irrigation projects in the region, and FAO has provided assistance to farm families through the provision of seeds and fertilizers.

47. The region of central Afghanistan is one of the poorest areas of the country. It is mountainous and snow-covered for about half the year, with no access through the winter months. For this reason, although the region is relatively stable and peaceful, the United Nations and NGOs were not able to deliver substantial assistance before the second half of 1992. Operations resumed in May 1993, after the winter, and modest help was delivered to the Bamyan hospital. The main assistance activities foreseen in the January appeal will be undertaken, to the extent possible, during the period June to September 1993. An increase in the level of repatriation of refugees from the Islamic Republic of Iran to this region may be expected, as returnees from that country may now transit through Baluchistan. Because priority areas in Bamyan had previously been cleared of land-mines, this problem was no longer an acute one for the region.

48. In mid-June, floods caused by heavy rain and melting snow in central Afghanistan struck villages along the road from Bamyan to Pul-i-Khumri, killing many and destroying houses, agricultural land and large sections of the road. On 20 June, a United Nations inter-agency team visited several of the affected villages to assess the extent of the damage. As a result, food-for-work activities were organized to repair the road and bring relief to the local population.

49. With regard to the eastern region of the country, the assassination of three United Nations staff on 1 February led to the temporary withdrawal of international staff for security reasons, although some brief visits to Jalalabad and parts of Kunar and Paktia have been possible since that time. While ongoing projects were not suspended after the assassination, the approval of new projects was slowed down, mainly owing to the absence of international staff. Since the area is still expected to receive a large number of returning refugees in 1993 and remains host to substantial numbers of displaced people from Kabul, it is intended to step up the level of operations, subject to satisfactory security reports.

50. Some of the most heavily mined areas in Afghanistan are in the eastern region and mine clearance activities proceeded as planned in Nangarhar, Laghman and Paktia. Irrigation and emergency shelter assistance were provided by UNHCR. WFP food aid benefited mainly communities with high rates of refugee return, including through food-for-work projects and displaced persons camps in Jalalabad. WHO and UNICEF programmes focused primarily on Nangarhar province, including the provision of medical supplies and training, immunization and assistance to the provincial hospital. UNICEF also undertook clean water supply and sanitation projects, including drilling tube wells, installing hand pumps and water tanks, and supporting a waste disposal project in Jalalabad, while WHO undertook water chlorination. FAO distributed seed and fertilizer for the 1993 cropping season and UNDP/Office for Project Services undertook subprojects for cleaning canals and kareses.

51. The withdrawal of international staff from Kandahar in early February, continuing unrest in the city and insecurity on the road from Quetta contributed to a lower level of activities in southern Afghanistan than planned. In

addition, the rate of refugee return to the region was low, although a number of spontaneous returnees from the Islamic Republic of Iran was reported. Landmines remain a serious problem, particularly around Kandahar city, but it was necessary to suspend mine-clearance activities temporarily due to flooding and insecurity in the region. Emergency shelter and irrigation activities were undertaken by UNHCR. WFP provided food aid to communities to which refugees were returning and to the poorest segments of urban population. Food-for-work and emergency feeding were undertaken in Kandahar, Helmand, Zabul and Oruzgan provinces.

52. WHO and UNICEF provided medical supplies, equipment and training in the region. UNICEF established Mother and Child Health and nutrition units in the provincial hospitals and helped to support the casualty units of three Kandahar hospitals. FAO delivered seed and fertilizer for the 1993 cropping season, to assist farm families in the region. UNDP/OPS continued irrigation rehabilitation activities.

D. Activities of non-governmental organizations

53. A large number of NGOs are working in Afghanistan, many of which organize themselves into coalitions for coordination of activities. Their activities are funded from various bilateral, multilateral and private sources. Some NGOs, including those working with UNOCHA on mine clearance, are implementing partners for the United Nations humanitarian programme.

54. The Agency Coordinating Body of Afghan Relief reports that, in 1992, its 62 member agencies spent a total of US$ 135.6 million from all sources, principally for activities in the sectors of agriculture, irrigation, health, shelter and road repair. The Afghan NGO Coordination Bureau reports that, since 1992, 23 of its member agencies have been carrying out projects in the fields of agricultural reconstruction, education, vocational training, health, shelter and food aid. Some US$ 11 million received from sources other than the United Nations has been spent under these projects. The Southern and Western Afghanistan Baluchistan Association for Coordination reports that, in 1993, a total of US$ 8.5 million was spent by its member agencies in support of humanitarian assistance activities in Afghanistan.

55. ICRC is present inside Afghanistan and has tried since the beginning of the year to attract as much attention as possible to this almost forgotten conflict. ICRC delegates, based in Kabul, Jalalabad, Mazar-i-Sharif and Herat, provide assistance and protection to a number of victims of the conflict. Furthermore, ICRC has a delegation in Islamabad and offices in Peshawar for the logistical support of the activities in Afghanistan, and in Quetta, where war-wounded patients from south-west Afghanistan are treated at the ICRC surgical hospital. The head of the delegation in Islamabad has regular contacts with the United Nations Coordinator for Humanitarian Assistance to Afghanistan. During these meetings, the Coordinator is briefed on ICRC activities within the context of the Afghan conflict. According to its mandate, ICRC will continue to assist victims of the Afghan conflict along its usual principles of action. ICRC strongly welcomes efforts to bring urgently needed assistance and reconstruction aid into war-torn Afghanistan.

II. REHABILITATION ASSISTANCE

56. The Secretary-General was requested inter alia to dispatch, as soon as possible, a team of experts to Afghanistan to evaluate the war damage and destruction and to prepare a comprehensive report, in cooperation with the Government of Afghanistan, on requirements for the rehabilitation and reconstruction of the country and to initiate a plan for mobilizing financial, technical and material assistance, including the convening of a conference of donor States and international financial institutions.

A. Summary

57. Owing to continued conflict in the capital for the first six months of 1993, and the prevailing security situation in critical locations elsewhere in the country, it has not yet been possible for a team of experts to be sent into the country to evaluate damage and destruction, and the extent to which the situation could be studied on the ground was limited. A group of 90 experts, including Afghan government officials and both Afghan and international specialists, was convened by UNDP in Islamabad over a period of two months in May and June 1993. The majority of these specialists has lived and worked in Afghanistan for a considerable period of time, and many continue to do so. The team was formed into technical working groups covering 10 major economic and social sectors and 10 intersectoral issues, and prepared a comprehensive draft Action Plan for Immediate Rehabilitation based on existing knowledge of the situation.

58. The mobilization of assistance in support of the Action Plan will depend in large part on the response of the new Government, which has now approved the draft, and upon the holding of a policy dialogue thereafter. This must be accompanied by field verification work which will enable the finalization of a rehabilitation strategy that can be presented to a conference of donors, hopefully early in 1994.

B. Detailed account of work undertaken

59. Immediately after the establishment of Afghanistan in April 1992, UNDP initiated a dialogue with the Government to undertake the formulation of a rehabilitation strategy. A director was appointed for the strategy exercise, who started working with the Ministry of Planning in Kabul on the establishment of a series of technical working groups. While work had to be suspended owing to continued conflict in the capital, leading to the evacuation of all United Nations international staff in August 1992, based on the initial work, UNDP approved $1 million for the strategy formulation exercise, to be ready to proceed as soon as circumstances permitted. Before the adoption of resolution 47/141 of 18 December 1992, a series of preliminary meetings were held by each of the technical working groups, convened in Kabul and later in Islamabad, including representatives of the Ministry of Planning and other Ministries, the United Nations and NGOs. With the outbreak of further conflict in Kabul and difficulties of travel in other areas of the country due to both conditions of security and the onset of winter, further work was postponed until March 1993.

60. As security conditions had still not improved by the end of March, the Strategy Steering Committee, chaired by the United Nations Resident Coordinator and comprising representatives of the Ministry of Planning, and heads of United Nations agencies, as well as the International Monetary Fund (IMF), the World Bank and representatives to Pakistan of the Asian Development Bank, decided to proceed to the extent possible with preparation of the strategy from Islamabad where all of the United Nations agencies normally resident in Kabul had established temporary offices after the evacuation. As the formation of a cabinet was still contentious, the Steering Committee recognized the limited viability of preparing a complete strategy without the benefit of a full policy dialogue with the Government and without field verification work throughout the country. It was decided to divide the exercise into several phases, the first of which would be the preparation of an action plan for immediate rehabilitation.

61. In May and June 1993, 10 sectoral and 10 intersectoral working groups were convened in Islamabad. A total of 90 individuals, of whom 34 were Afghans from various Ministries and from NGOs with recent first-hand knowledge of the situation inside the country, contributed to the production of an elaborate 1,400-page, eight-volume draft Action Plan and an Executive Summary. The documentation is now being studied by the Government for accuracy. Interested donor embassies and NGOs have been briefed on the work undertaken and have been provided with copies of the Executive Summary.

62. The draft Action Plan is being finalized, in consultation with the Government, and is expected to be issued on 24 October 1993. This will enable the Government to begin a dialogue with potential donors on the immediate resumption of assistance programmes. Depending on the wishes of the Government, and the overall security situation, it is hoped that it will then be possible to commence field verification work, which is particularly important for engineering studies to be undertaken. The road network, communications and infrastructure installations will be examined in more detail. The strategy team will then hold a policy dialogue with the Government to transform the Action Plan into a full-scale rehabilitation strategy. When agreement is reached on profile and priorities, the Government would present the strategy to a conference of donor States and international organizations. It is hoped that this can take place early in 1994.

III. THE CURRENT POLITICAL SITUATION IN AFGHANISTAN

63. The Secretary-General was requested to continue to monitor the overall situation in Afghanistan and make available his good offices.

64. The Office of the Secretary-General in Afghanistan and Pakistan (OSGAP), established on 15 March 1990, assists me in monitoring the situation in Afghanistan. It is headed by my Personal Representative, Mr. Sotirios Mousouris. Since 1 January 1993, he has been assisted by one Senior Military Adviser and one Senior Political Adviser. OSGAP is officially based in Kabul, but owing to security concerns its international staff have been operating from Islamabad, sharing temporary quarters with UNOCHA, which is also headed by Mr. Mousouris in his capacity as Coordinator of Humanitarian Assistance to Afghanistan. My Personal Representative travels to Kabul, when

security permits, and to other parts of Afghanistan, to monitor developments and maintain contacts with Afghan government officials, political leaders and other personalities, as well as with representatives of regional and other countries. He visited Kabul on four occasions, Herat on two and Mazar-i-Sharif on one occasion. During his trips to Kabul, he held talks with the President, the Prime Minister and the Foreign Minister, as well as with other Afghan officials and leaders. During his trips to Herat and Mazar-i-Sharif, he met with the leaders in those areas, Mr. Ismail Khan and General Rashid Dostum respectively.

65. Since my last report, the newly established Islamic State of Afghanistan, despite considerable efforts, has not yet succeeded in developing the political and security conditions necessary for the urgent task of rehabilitation. The country is still experiencing a difficult transition, characterized by political discord over power sharing that often takes the form, particularly in Kabul, of blockades, rocketing and intermittent fighting, as well as inadequate consultations and reluctance to reach compromises. The abundance of heavy weaponry and ammunition exacerbates the situation and frustrated efforts towards political normalization undertaken inside the country late last year. A major effort launched in early 1993 by regional countries and reinforced by intra-Afghan negotiations has, however, recently led to a modus vivendi which offers certain encouraging prospects for peace. But the accords, reached in Islamabad on 7 March 1993 and in Jalalabad on 18 May 1993, still have not resolved difficulties within the Government nor have they yet removed the potential threat of renewed fighting in Kabul. Acute humanitarian problems, related to the displacement of thousands of citizens of the capital, were recently exacerbated by an outbreak of cholera and other ailments in Kabul and other parts of Afghanistan. The armed conflict on the Afghan-Tajik border on which I have recently reported to the Security Council (S/26311), and which has been the subject of appeals by me to the concerned parties for restraint and the cessation of armed activities, has added a further complication to the problems of the country.

66. In spite of the negative impact that armed conflict around the capital has had on the country, especially affecting the rate of return of refugees, local efforts have succeeded in creating peaceful conditions in many provinces. In areas where the provincial authorities have been successful in collecting illegal arms and reopening major highways and roads for safe public use, security has improved, permitting United Nations offices to operate.

67. I have found it extremely helpful, in dealing with the difficult and complicated problems of Afghanistan, to seek the views and advice of various interested countries. After consulting the representatives of the Islamic Republic of Iran, Pakistan, the Russian Federation, Saudi Arabia and the United States of America, I issued a statement on 22 June 1993 in which I encouraged the international community to support the peaceful political process in Afghanistan, in particular the efforts to observe the cease-fire and to ensure the safety and well-being of the civilian population. I also reminded donor Governments that my appeal for humanitarian assistance remained seriously underfunded, and that without additional funding from the international community, essential United Nations programmes might have to be curtailed.

68. It is the view of some of the Afghan leaders that political normalization and peace in Afghanistan can ultimately be reached either through general

elections or through a national gathering (Loya Jirga or Shoora) which fully represents all Afghan people. Some Afghans favour the Loya Jirga, others the holding of a general election. The Islamabad peace accord provides for the holding of elections for a grand constituent assembly within 8 months of the signing of the accord. The grand constituent assembly would formulate a constitution under which general elections for the president and parliament would be held within the prescribed period of 18 months. In a letter dated 14 July 1993, prepared on the instruction of the Prime Minister, the Ministry of Foreign Affairs formally informed OSGAP of the plan to hold elections, and invited the United Nations to supervise them and to provide the necessary financial assistance.

69. There is one outstanding issue, which is referred to in my report to the General Assembly last year, and which I wish to bring again to its attention. This relates to the continuing presence of the former President, Dr. Najibullah, and members of his entourage in the OSGAP compound since the change of Government in April 1992. Dr. Najibullah is seriously afflicted by kidney disease and I believe, on humanitarian grounds, that he, along with his companions (which include a woman and children), should be allowed to leave Kabul so that he can receive the necessary medical treatment. It is my hope that the necessary steps can soon be taken to bring this matter to an early and satisfactory resolution, in accordance with the declared policy of national reconciliation and tolerance and in conformity with international law and the recognized standards of human rights.

70. The goal of establishing peace and stability in Afghanistan is still far from being achieved. The process of political normalization is not yet sufficiently broad based. It does not include major political forces, organizations and individuals who are either not members of the major parties or not involved in the ongoing armed conflict. The two peace accords reached in 1993 and the resort to negotiations and compromise among the leaders are hopeful signs of the determination to continue the search for peace and stability. The intention of a number of Afghan leaders to seek the will of the people on the future of their country and to convene a national gathering or hold elections is an encouraging development. The paramount problem to be urgently dealt with, however, remains that of creating peace and security in and around Kabul, as well as in other parts of the country, by collecting the heavy weapons still abundant everywhere and by opening all roads to civilian movement.

IV. OBSERVATIONS

71. In 1992, over 1.5 million long-standing Afghan refugees returned to their country and began the process of rebuilding their homes, demonstrating their determination to resume normal lives. Unfortunately, 1993 has not witnessed the realization of these aspirations. As a result, the number of returning refugees in 1993 fell below the predicted levels.

72. While some progress has been made in parts of the country, the humanitarian situation in other parts remains serious. The presence of land-mines remains an overwhelming obstacle in daily life. The Government of Afghanistan is not yet in a position to provide many of the basic necessities to its needy population. The continuing lack of security in Kabul, in particular, has prevented the

restoration of essential services and restricted much needed access of relief supplies, while creating even further destruction and displacement. Under these circumstances, the United Nations has endeavoured to provide the required emergency assistance. Its capacity to do so at the appropriate and desired levels remains limited, however, not only by poor security conditions but also by the lack of adequate resources.

73. The onset of winter brings increased needs for food, shelter, fuel and health assistance for vulnerable populations, and I fear that unless the international community acts quickly the humanitarian emergency may worsen. It is therefore my intention to issue a new consolidated appeal in the coming weeks, to cover urgent requirements during the period October 1993 to March 1994.

74. The international community has recognized the acute need for rehabilitation and development in Afghanistan. While steps have been taken towards this goal, the process has been impeded by the absence of a peaceful and secure environment. The establishment, and maintenance, of conditions of security will not only enable the early return of United Nations international staff to Kabul, permit a full-scale resumption of operations in many parts of the country and enhance donor confidence, but it will also create the appropriate conditions for the convening of a representative grand gathering, or the holding of elections, and for the beginning of the reconstruction of the country.

75. This is a crucial moment for Afghanistan, and I am therefore appealing to the international community not to lost heart at the enormity of the country's problems, but to continue providing its much needed support. A peaceful and stable Afghanistan will enhance peace and security in the region.

Annex I

INFORMATION PROVIDED BY MEMBER STATES

In addition to the information on activities set forth above, several Member States have provided information of actions they have taken with respect to assistance to Afghanistan.

Denmark

In 1992, Danish emergency assistance to Afghanistan amounted to DKr 28,390,975, channelled through ICRC International Federation of Red Cross and Red Crescent Societies (IFRC). Furthermore, bilateral assistance of approximately DKr 20 million was channelled through the Danish Committee for Aid to Afghan Refugees (DACAAR). In 1993, the Danish emergency assistance amounts to DKr 13,968,000, channelled through UNHCR and UNOCHA.

Germany

German assistance to Afghanistan is as follows:

1. Humanitarian aid 1992/1993

Via international organizations

	Deutsche mark
ICRC programme in Afghanistan	700 000
Contribution of medicines for ICRC hospital in Kabul	25 000
ICRC hospital programme (Wazir Akbar Kh)	400 000
Via non-governmental organizations	
Aktion Friedensdorf Oberhausen Grant for transportation costs for relief supplies	30 000
Contribution of food, Kabul (February 1993)	150 000
Second food contribution, Kabul (March 1993)	250 000
Contribution of medicines for leprosy project	6 000
German Afghanistan Foundation Medical supplies for three hospitals	42 000
Embassy Islamabad Medicines for hospitals in Kandahar and neighbourhood	50 000

		Deutche mark
	Afghanistan Nothilfe e.V. Typhoid fever and malaria prevention for 5,000 returning refugees in the province of Kandahar	50 000
	Association for Afghan Refugees Two basic health units in Jalalabad	35 000
	Friedensdorf International Oberhausen Contribution of medicines for various hospitals	200 000
	Aid for Afghan Refugees in Pakistan	
	HELP - Help towards Self-help e.V. Surgical Treatment for Afghans Project	126 800
	Mother and Child Health Clinic, Peshawar	30 000
	Afghanistan Nothilfe e.V. Basic medical care for refugees from Afghanistan	300 000
2.	Projects under financial and technical cooperation in the narrower sense have not been implemented any more since 1980	
3.	Further training programmes of the German Foundation for International Development (DSE)	241 150
4.	Further training programmes of Carl-Duisberg-Society e.V. (CDG)	86 613
5.	Further training in Germany since 1988	
	Various specialist programmes to prepare Afghan skilled workers for their return to Afghanistan	13 534 450
6.	Promotion by private agencies between 1990 and 1992	
	Setting up and operation of 8 health stations in Kandahar/Helmand (Afghanistan Nothilfe e.V.)	506 677
	25-bed-hospital Mirwais Mena/Kandahar (Afghanistan Nothilfe e.V.)	454 860
	Veterinary stations in Chamkani/Paktia, Chark/Logar, Baraki Rajan/Logar, Ghorband/Parwan, Nijrab/Kapisa (German Afghanistan Foundation e.V.)	651 061
	Rehabilitation of the irrigation system Landar (German Afghanistan Committee)	31 800

	Deutsche mark
Reconstruction of the Terezel region, Paktia (HELP - Help towards Self-Help e.V.)	274 115
School and training Mirwais Mena/Kandahar (Afghanistan Nothilfe e.V.)	567 472

7. Food Aid 1991-1992 via non-governmental organizations

Food aid, regional purchase in Pakistan and the Islamic Republic of Iran (through German Afghanistan Foundation e.V.)	962 732
Financing of regional purchase and transport of 2,805 tons of various foodstuffs for needy families and returning refugees in Herat province (through German Afghanistan Foundation e.V.)	2 076 115
500 tons of lentils and 300 tons of vegetable oil, provinces of Kabul, Parwan, Balx, Kunduz, Jawjan, Samargan, Baqlan, Bamyan and Paktia (through Freedom from Hunger Campaign)	726 900
Food/Cash-for-Work measure for needy families in Nagahar and Kandahar (through Afghanistan Nothilfe e.V.)	2 667 000
5,000 tons of wheat, provinces of Kabul, Parwan, Balx, Kunduz, Jawlan, Samargan, Baqlan, Bamyan, and Paktia (through Freedom from Hunger Campaign)	2 081 000
Repair of grain silo/mills complex in Kandahar, supply of 600 tons of grains	1 631 825

8. Contributions for Afghan refugees in Pakistan

Financial and technical cooperation 1981-1992

Within the scope of various financial cooperation and technical cooperation projects, contributions were and still are going to Afghan refugees in Pakistan:

Technical cooperation projects: Technical Training Centre Peshawar and Quetta, Orthopaedic Centre Peshawar, primary education for Afghan refugees, primary education in refugee-affected areas, dissemination of fuelwood-saving technologies, timber production and saving in the reconstruction of Afghanistan;

Financial cooperation projects: Lorries for the supply of Afghan refugees, drinking water supply North-West Frontier province, employment measures for refugees I-III.

Food Aid

1991: Supply of 30,000 tons of soft wheat (World Food Programme).

1992: Supply of 25,000 tons of soft wheat.

9. In addition, contributions to the United Nations (e.g., UNHCR) were made which cannot be broken down country-wise.

Norway

According to the budget of the Norwegian Ministry of Foreign Affairs, the following assistance has been granted to Afghanistan:

1992	Millions of Norwegian kroner	Approximate equivalent, millions of US dollars
Development assistance	5.5	0.8
Humanitarian emergency assistance	70.8	10.1
Total	76.3	10.9

1993		
Development assistance	4.5	0.6
Humanitarian emergency assistance	50.5	7.3
Total	55.0	7.9

Sweden

Sweden has contributed emergency assistance to Afghanistan, as follows:

For the fiscal year 1992/1993

	Millions of Swedish kronor
Svenska Afghanistankommittén (SAK - a Swedish NGO)	37.5
UNOCHA	
Mine clearance - August 1992	5.0
Mine clearance - April 1993	4.0
UNHCR	20.0
WFP	20.0

	Millions of Swedish kronor
UNICEF	10.0
Swedish Pentecostal Relief Organization (PMU)/ Medical Assistance	0.1
For the fiscal year 1993/1994	
SAK	10.0

Annex II

INFORMATION PROVIDED BY ORGANIZATIONS OF THE UNITED NATIONS SYSTEM

United Nations Children's Fund

During the period under review, UNICEF continued to implement its Emergency Relief and Rehabilitation programmes for children and women, including the winter emergency relief and assistance for the 500,000 internally displaced persons. Focus was also on the summer emergency needs of the displaced persons, refugees, cholera and flood victims and others through emergency supplies and the rehabilitation of essential health, drinking water, sanitation and other basic services.

The success of UNICEF programmes in Kabul, Mazar-i-Sharif, Herat and elsewhere has only been possible because of the intense inter-agency cooperation, the availability of the United Nations aircraft, the hard work of the few international staff permitted to be deployed in Afghanistan and, above all, the dedication of national programme staff working in Kabul and six other locations inside the country.

Health

In cooperation with WHO and many NGOs, UNICEF supported as a priority activity immunization and other primary health services to both urban and rural areas, and assisted in the repair, re-equipment and rehabilitation of hospitals and health centres. Drugs and health supplies were provided to hospitals and health centres attended by large numbers of internally displaced families and refugees. Mobile and fixed teams carried out and monitored the Expanded Programme of Immunization activities. In addition, vital operational support such as generators, heaters and fuel have been provided to strengthen the capacity of these institutions, thus enabling them to deliver better services. In Kabul, the six major hospitals have been rehabilitated as well as hospitals, health centres and day-care centres in Herat, Mazar-i-Sharif, Jalalabad, Bamyan, Faizabad, Kandahar, Helmand and Lashkargah.

Nutrition

Activities included provision and distribution of food items (KMIX, high protein/BP-5 biscuits, oil, rice, sugar, beans, tea, vitamin A) to kindergartens and orphanages. Other nutrition activities included screening of all children under five in 5 cities, growth monitoring, supplementary and therapeutic feeding, rehabilitation and support of nutrition wards in hospitals and health centres.

Acute respiratory infections (ARI)/Control of diarrhoeal diseases (CDD)

The oral rehydration therapy production plant in Kabul, established with UNICEF support, was looted and destroyed during the fighting in May 1993. Offshore procurement of oral rehydration salts (ORS) sachets was therefore undertaken to supplement existing stock for prepositioning in all major centres in preparation for the expected upsurge in diarrhoea during the summer.

Subsequently, a distribution was made to over 140 oral rehydration therapy corners, including the camps for internally displaced persons.

Water and environmental sanitation

Drinking water supply facilities in health institutions and schools were rehabilitated and renovation and installation of piped water schemes and hand pumps, with the provision of equipment and the supply, drilling, renovation and chlorination of wells, were carried out in Herat, Mazar-i-Sharif, Jalalabad, Faizabad and Kabul. Extensive sanitation activities were also undertaken in these areas, including garbage collection and disposal and latrine construction in the camps.

Education

UNICEF support aims at (a) rehabilitating and the revival of schools in communities by assisting with minor repairs of classrooms and basic equipment, and providing pupils' learning supplies; (b) an advocacy and community awareness campaign for universal education, including female education; and (c) support to early childhood activities in kindergartens and day-care centres. Thirty-five primary schools were renovated in three northern provinces (Balkh, Kholm, Shamali) and in Herat educational materials were supplied. In addition, training of schoolteachers in Jalalabad was undertaken.

Children in especially difficult circumstances

Together with ICRC and Red Crescent Societies and other NGOs, UNICEF continued to support projects for street children and the identification of the disabled. These activities were also linked with the International Labour Organisation (ILO) project for employment of the disabled and with the prosthesis and orthopaedic activities of WHO and ICRC.

A Kabul "Drop-in centre" for street children was established to provide peer support, counselling, skills training, family tracing and assessment, as well as daytime amenities such as bathing facilities and snacks, in order to provide a place where children can have a sense of belonging and hope.

Women with special needs

Based on a growing demand in previous years to work with the most deprived women and those directly affected by the war, activities were started to involve widows, disabled women, homeless women and women caring for disabled family members in income generation and small-scale food production and to teach relevant skills, literacy and numeracy. Activities were begun for income-generation skills training in poultry raising, carpet-making, tailoring, embroidery and literacy in Kabul, Mazar-i-Sharif, Balkh and Kholm. Close linkages were also developed with an ILO community-based rehabilitation project for the disabled, and through this project activities spread to the Shamali region north of Kabul.

Training

Activities included training of medical staff on ARI and CDD case management, refresher courses on various aspects of immunization and training of village school and day-care centre teachers.

Inter-agency cooperation

UNICEF has maintained close cooperation with all United Nations agencies operating in Afghanistan and with UNOCHA. During this period, UNICEF also participated in the UNDP project for the preparation of a rehabilitation strategy for Afghanistan contributing to the chapters on health, drinking water and sanitation, nutrition and education.

In Herat, in cooperation with WFP, an ongoing food-for-work project to supplement income of health workers started in January 1993 (health workers' wages are currently insufficient for their basic needs). With UNHCR, UNICEF provided tents to the School Board for setting up of primary schools in rural areas.

In Jalalabad, in cooperation with WFP, an ongoing food-for-work project for sanitation started in May 1993. Better sanitation in the city is provided by the cleaning of ditches and gutters, the disposal of garbage outside the city and the cleaning of latrines with lime. In return, workers receive wheat through the municipal sanitary department.

United Nations Development Programme

UNDP has been able to continue its large programme of assistance to Afghanistan despite the many security problems encountered during 1992. While the Office of the Resident Representative/Resident Coordinator was temporarily transferred from Kabul to Islamabad, it continues to administer programmes all over Afghanistan except for the capital. It has been possible periodically to visit Kabul for briefing/consultation and to sign project documents with the Government, and to support the emergency humanitarian relief programme by providing practical assistance through ongoing water supply and shelter programmes in the capital, as well as by funding most of the humanitarian programme's United Nations Volunteers. UNDP has an expenditure target of $33 million for Afghanistan for the biennium 1993-1994.

A key UNDP input for 1993 has been the preparation of an Action Plan for Immediate Rehabilitation as the first phase of a rehabilitation strategy for Afghanistan. This activity is described in detail elsewhere in the report of the Secretary-General. The Action Plan provides the framework for assistance from all sources, including UNDP itself.

Most UNDP funds are dedicated to two rural rehabilitation programmes which have been operational for several years. One of these began as a cross-border project from Pakistan and continues to provide an average of US$ 10 million per annum to eastern and southern Afghanistan, operating through communities at the subdistrict level using local contractors. Both programmes have continued to provide direct assistance to irrigation, water supply, veterinary and crop

production projects in each of the 29 provinces. The changing security situation has meant that work has stopped temporarily in some locations from time to time, but generally it has been possible to meet established targets and objectives. A number of other ongoing programmes are also still having a significant impact.

The following major outputs have been achieved in the last year:

(a) 24,000 tons of seed produced for distribution with extension support;

(b) 1,005 km of irrigation systems cleaned/rehabilitated;

(c) 171,000 cubic metres of irrigation structures built;

(d) 108 km secondary roads repaired;

(e) 205 veterinary workers trained/equipped;

(f) Over 5,000 houses repaired/rebuilt;

(g) Water supply restored in Jalalabad and hospitals in Kabul and Herat;

(h) 39 support workers trained for vocational training of disabled in community outreach programmes;

(i) Funding provided for over 50 United Nations Volunteers in both humanitarian and rehabilitation programmes of the United Nations.

United Nations Population Fund

Despite political and security problems, UNFPA continued to support the Maternal and Child Health/Family Planning project. The project seeks to reduce infant, child and maternal morbidity and mortality by strengthening pre- and post-natal health care and services. UNFPA is also maintaining a presence in Islamabad with UNDP, in order to respond to any emerging need in the field of population for Afghanistan. Although funds are available to expand the field activities of UNFPA in Afghanistan, the political situation tends to hamper such development.

Economic and Social Commission for Asia and the Pacific

ESCAP is not geared for undertaking activities of an emergency relief nature. For a medium-term programme for reconstruction of the country, it is in a position to provide assistance, particularly in such areas as rehabilitation of the transport and communications links and infrastructure in the country, the process of economic reform, including the transition to a market-oriented economy, and in raising the absorptive capacity for foreign investment.

ESCAP could also assist by undertaking activities in the implementation of Agenda 21 in the Asian and Pacific region by providing tools and methodologies for adopting economic policies leading to the promotion of sustainable

development in Afghanistan. ESCAP regional advisers on macroeconomic policy and on trade policy can provide useful support to the reconstruction efforts in Afghanistan, if their services are requested.

Afghanistan has recently established a Permanent Mission to ESCAP in Bangkok and has appointed a Permanent Representative at the Ambassadorial rank to head the Mission. The establishment of the Permanent Mission could serve as a useful conduit between the Government and ESCAP for exchanging information on possible programmes of assistance. Afghanistan was also represented at the forty-ninth session of ESCAP, held at Bangkok from 21 to 29 April 1993 with a delegation headed by the Deputy Minister of Planning. The Deputy Minister of Foreign Affairs of Afghanistan paid a visit to ESCAP in late May and reiterated his Government's desire for closer cooperation with ESCAP with a view to facilitating the country's reconstruction efforts. Despite these positive developments, invitations extended by ESCAP to Afghanistan for attendance at various meetings and projects of a technical nature rarely receive a response.

United Nations Centre for Human Settlements (Habitat)

Directly addressing the critical need for Habitat to make an early contribution to the continuum of relief, rehabilitation and development activities of the United Nations system, Habitat is playing a lead role in human settlements reconstruction and rehabilitation efforts in Afghanistan. Since 1990, Habitat has been actively involved with UNOCHA in reconstruction and community support to enable resettlement of Afghans returning to both urban centres and rural communities. These activities have frequently been undertaken in close collaboration with UNDP, WFP, UNICEF and UNHCR field personnel. Despite the need last year to close its Kabul office, Habitat has maintained operations out of Mazar-i-Sharif and Peshawar, while also contributing in Islamabad to the inter-agency effort to develop a comprehensive rehabilitation strategy for Afghanistan.

In addressing these challenges, two Habitat staff members lost their lives in Kabul in August 1992, and two more staff died in an ambush outside Jalalabad in February 1993.

However, despite the difficult security conditions, Habitat is, where possible, maintaining and expanding its field contacts and continuing to provide assistance for the resettlement of Afghans affected by the war in both rural and urban areas. Its ongoing projects aim to support at least 10,000 families in nine provinces, including Kabul, Parwan, Kapisa, Balkh, Samangan, Jowzjan and Paktia, through improved supplies of building materials and repairs to basic infrastructure.

At this crucial stage of refugee return, the focus of Habitat's work is on the establishment of small-scale rural manufacturing enterprises for essential materials, to generate employment and achieve sustainability where possible. Other Habitat activities include direct support to 70 communities, aimed at repairing basic rural infrastructure, with significant inputs from the beneficiaries.

Habitat has also been involved in the supply of emergency assistance, with plastic sheeting for 10,000 families supplied to Kabul for winterization of homes that were damaged during the recent fighting in the city. Habitat project personnel have recently participated with staff of OSGAP, UNDP, WFP and WHO in one-day missions to Kabul to follow up on preparations for further assistance operations.

United Nations International Drug Control Programme

While precise estimates of the extent of opium poppy cultivation in Afghanistan are not available, it is certain that annual production levels have been increasing in recent years. The figures in 1992 vary from low estimates of 600-700 tons to high estimates of over 2,000 tons. Opium poppy has traditionally been cultivated and used in the provinces of Helmand, Oruzgan and Kandahar in the south-west of the country and in Badakhshan, Balkh, Kunar and Nangarhar in the north and east. No data or reliable information is available concerning drug processing laboratories in Afghanistan. Some sources estimate that about 70 per cent of Afghan opium-based heroin is produced in Pakistan and the remaining 30 per cent in Afghanistan and, to a lesser extent, in the Central Asian republics bordering Afghanistan. Figures for the number of drug processing laboratories in the Afghanistan/Pakistan border area vary between 100 and 200.

It has been approximated that the illicit consumption of drugs has also sharply increased during the last years as a result of the harsh living conditions caused by the prolonged war and, more recently, as an import by the returning refugees who became drug addicts in the refugee camps. This drug consumption refers mainly to the abuse of opium, heroin and hashish.

At the initiative of UNDCP, other United Nations agencies funding or executing development or rehabilitation projects in Afghanistan have agreed to include a "Poppy clause" in the documents of their projects implemented in the opium-growing areas of Afghanistan. Accordingly, the terms of reference under which United Nations funds are committed to rehabilitation efforts in Afghanistan include recognition of the serious impact of illicit crop cultivation and narcotics trafficking and abuse on the health and well-being of Afghans as well as on the rehabilitation efforts themselves. The commitment of United Nations funds is, therefore, being undertaken to support efforts to eradicate illicit crops and to reduce and eliminate narcotics trafficking and abuse.

UNDCP ongoing activities

The UNDCP-funded and UNDP/Office for Project Services executed cross-border project, Drug Control and Rural Rehabilitation, Phase II, constitutes the main UNDCP project activity in Afghanistan. The project operates from Peshawar in the North-West Frontier province of Pakistan. In March 1993, a US$ 5 million Phase II project document was signed, which will extend project activities through March 1995. The project is aimed at drug control in selected main opium poppy-growing areas of Afghanistan through implementation of integrated rural community development and rehabilitation activities related to reduction of drug supply and demand. The project carries out its activities in Afghanistan, in

collaboration with Afghan and international NGOs contracted to carry out subprojects under the project's supervision.

Future programme

Future UNDCP programme activities for Afghanistan plan to include the following main components, assuming the security situation permits:

(a) Continued collaboration with other United Nations agencies, bilateral donors and national and international NGOs and inclusion of drug control aspects in all relevant programmes and projects funded or executed by them;

(b) Strengthen national capacities to plan, design and execute drug control activities;

(c) Design of a national drug control master plan;

(d) Continued support to integrated community development programmes aimed at supply and demand reduction in selected key areas. Assistance to the Afghan authorities to strengthen their capacity to take over and continue these activities on a sustainable, self-reliant basis.

Food and Agriculture Organization of the United Nations

The FAO Global Information and Early Warning System on Food and Agriculture (GIEWS) regularly monitors the crop and food supply situation in Afghanistan and publishes its assessments in the System's monthly reports, "Foodcrops and shortages" and "Food outlook". The System's assessments, inter alia, assist the donor community with decisions concerning the provision of food aid.

The latest GIEWS assessment indicates that output of wheat in 1993 will be below average for the third consecutive year. Production of cereals has lagged well behind requirements for the past several years. The already difficult economic situation will deteriorate further with increased large-scale arrival of returnees from Pakistan and the Islamic Republic of Iran through the summer. The returnees, together with the internally displaced and destitute people and the refugees from Tajikistan, would require additional relief assistance.

FAO has provided technical support to the agricultural rehabilitation planning of Afghanistan through a project proposal to address the necessary groundwork for more comprehensive and longer-term agricultural development planning once the political situation stabilizes, and through the agricultural rehabilitation strategy, which included collection and updating of agricultural data, preparation of an agricultural sector profile, review of cross-border and in-country agricultural programmes, thrust areas for national agricultural rehabilitation (along with an assessment of existing institutional constraints and options to deal with them) and a framework for the Northern Afghanistan Agricultural Rehabilitation Programme (NAARP).

FAO will participate in the Nordic Women in Development Fund (WID) Umbrella Project for agricultural, horticultural and animal husbandry projects involving

female farmers in Afghanistan. The project document has been finalized and is in the process of receiving appropriate clearances. FAO has also prepared a project proposal for Support to Women in Agriculture and Rural Development in Afghanistan for UNDP funding. A decision on funding is awaited.

Since December 1992, the FAO Office for Special Relief Operations (OSRO) has executed two new projects for reintegration of and assistance to returnees to Afghanistan for a total budget of US$ 1,127,500.

Inputs provided under the project entitled "Provision of staple food crop seeds for the 1993/1994 planting season (Cross border Pakistan)" (OSRO/AFG/301/EEC) are certified seeds of adapted varieties (1,000 tons of wheat and 200 tons of maize), to be distributed at main distribution points along the border with Pakistan.

Procurement, supply and distribution of inputs, plant material, sulphur, hand tools and dusters under the project "Rehabilitation of orchards in Afghanistan" (UNO/AFG.015/UNA) will benefit 15,000 farmers/families whose orchards were destroyed by war.

The situation in Afghanistan, particularly in Kabul, resulted in a major setback to the ongoing FAO programmes and slowed down future programme development. The UNDP/IPF for the Fifth Cycle, including the savings from the Fourth Cycle IPF, is estimated at US$ 80 million. Two programming missions, one for northern Afghanistan and the other for southern and eastern Afghanistan planned for April-June 1993, have been postponed due to the current situation in these areas. However, the ongoing in-country projects in the northern and western parts of the country are continuing. Two of these projects, "Seed Production and Training" (AFG/86/010) and "Veterinary services" (AFG/90/006), are IPF-funded by UNOCHA. Substantive revisions of these projects have been made with additional funding for their extension up to the end of 1993; and, if needed, these would be extended further until the situation improves. The FAO cross-border programme would also continue, covering ongoing activities in seeds/fertilizer inputs, provision of planting materials for orchards and improvement of minor/on-farm irrigation systems. The donor funding is available through UNOCHA and FAO for continuation of this programme during 1992-1993.

One new project, "Assistance to Agricultural Rehabilitation" (AFG/92/008), was approved by UNDP for US$ 8 million from IPF, mainly for administrative and logistic support for the cross-border programme for 1993.

All the ongoing projects, regardless of their source of funding, are presently looked upon as having short-term emergency/rehabilitation activities, but in most cases they are linked to medium-term development programmes under IPF covering the whole country, to be implemented when the situation permits. In the meantime, the preparation of the rehabilitation strategy for Afghanistan is being undertaken by the United Nations under a UNDP/IPF-funded project (AFG/92/007), with the participation of all the United Nations agencies represented in Afghanistan, NGOs and the Government. FAO has taken the lead role in the preparation of sectoral documents for the strategy in the areas of agriculture/irrigation and rural rehabilitation and development.

World Health Organization

WHO emergency assistance for the reconstruction and rehabilitation of war-stricken Afghanistan has primarily focused on strengthening the health care infrastructure through rehabilitation of health care facilities, human resource development and the control programme of priority diseases.

The activities of WHO have been undertaken by the Emergency Relief Operations Division (ERO) at headquarters through its offices in Peshawar and Quetta since 1989. Since June 1993, the development programmes of WHO have been carried out through the WHO representative's office in Kabul and Islamabad, under the administrative and financial control of the WHO Regional Office for the Eastern Mediterranean in Alexandria (EMRO). The overall coordination and resource mobilization is carried out by the WHO headquarters.

WHO programmes have been developed based on the Master Plan for the Rehabilitation and Reconstruction of the Health System for Afghanistan. The programmes under the Master Plan include: assistance to disabled Afghans; the rehabilitation and/or reconstruction of health facilities, the training of Afghan medical staff and other health workers; immunization programmes (EPI); mother and child health care (MCH); environmental health; the control programme of priority diseases such as malaria, tuberculosis, acute respiratory infections (ARI) and diarrhoeal diseases; a health information system and any other activities related to the early rehabilitation and reconstruction of the health sector in the country.

Up to 30 June 1993, the total amount of US$ 16,646,021 had been received through UNOCHA for health activities, with a remaining balance of US$ 2,515,457. It is necessary to note that this sum is already committed to pending projects which were proposed in late 1992. The actual implementation of WHO health programmes is with the technical agencies, most of which are NGOs. During 1992, WHO supported 12 NGOs in various projects in the programme areas, as stated in the Master Plan. The main effort was on emergency assistance. This resulted in a substantial programme budget for the construction and rehabilitation of basic health facilities, development of health manpower and the control programme of priority diseases. Priority was given to traditionally underserved areas of massive destruction of the health infrastructure and areas of possible massive return of refugees.

As a result of a massive return of refugees from the Islamic Republic of Iran and Pakistan, an action plan has been developed, in consultation with other United Nations agencies. The Secretary-General launched an appeal in January 1993 for the period January to September 1993. The requested amount of US$ 138.1 million includes US$ 8,332,000 for the WHO health sector in Afghanistan. Unfortunately, to date, WHO has not received any funds from the appeal, as a result of which several major programmes have had to be delayed.

WHO is gearing its operations to minimize health problems which may occur from the sudden influx of returning refugees. An action plan for the emergency health and medical relief operations programmes for the returnees was prepared. Health posts at the main entry points to Afghanistan from Pakistan and the Islamic Republic of Iran have been established and medical supplies and equipment for hospitals located at transit points also provided by WHO. In

order to respond to an influx of displaced persons from Kabul to other parts of Afghanistan or Pakistan, WHO assisted the Ministry of Health in providing emergency supplies for the hospitals and mobile health units in Kabul and Jalalabad.

During and after the heavy fighting and escalation in Afghanistan, WHO provided emergency medical kits, drug supplies and equipment for hospitals in major areas of fighting. In order to provide emergency and technical assistance to the local population and returning refugees, WHO has established six sub-offices in different parts of Afghanistan.

Heavy fighting and lack of security have been the most significant constraints in the implementation of WHO programmes in 1992 and early 1993. The active conflicts and fighting within the target areas became a great hindrance to access, operations and full implementation of the programmes. The freedom of movement of WHO and NGO staff for programme monitoring and technical support was limited accordingly. The office of the WHO representative was temporarily transferred from Kabul to Islamabad where it continues to operate the programmes in Afghanistan. Periodic missions were conducted to visit Kabul and other parts of Afghanistan.

Although security considerations inevitably brought delays in the implementation of some major projects, several of them have been implemented. The following outputs have been achieved or supported by WHO in 1992:

(a) Provision of more than 67 tonnes of medical supplies and equipment to hospitals and health centres in the provinces of Kabul, Herat, Mazar-i-Sharif, Kandahar, Badakhshan, Baghlan, Kunduz, Takhar, Kapisa, Logar, Paktia, Ghazni and Nangarhar;

(b) Establishment of six WHO sub-offices in Jalalabad, Kandahar, Herat, Mazar-i-Sharif, Bamyan and Faizabad, with a central coordination office in Islamabad and Kabul;

(c) Completion of a 40-bed training hospital with surgical, X-ray, laboratory and training facilities in Baraki Barak and Logar provinces;

(d) Construction of 7 basic health posts in Wardak and Nangarhar provinces and 17 clinics in northern Afghanistan (10 clinics were completed);

(e) Construction and renovation of clinics and hospitals, including 10 health facilities in Logar, Paktia and Jowzjan provinces (6 clinics were completed), and renovation of the MCH unit in Jalalabad;

(f) Reconstruction of 10 clinics in Kandahar, Oruzgan, Farah, Nimroz, Badghis, Ghor, Ghazni and Zabul;

(g) Provision of technical expertise to agencies involved in EPI activities; developing standard EPI training for vaccinators, cold chain technicians and supervisors, supporting the establishment of vaccine storage facilities and four immunization centres in camps for displaced persons in Jalalabad and Sarobi; and creation of a master plan of action formulated by different EPI implementers;

(h) Training activities for:

- EPI technicians on management of cold chain facilities, including 22 vaccinators;

- 20 laboratory technicians and microscopists;

- 90 community health workers and traditional birth attendants;

(i) 79 health workers were certified from WHO standard refresher courses (Combined Mid-level Continuing Education Programme (CMCEP)). The check lists for CMCEP examinations were provided by WHO;

(j) Standardization of case management protocols and training of physicians in the ARI control programme;

(k) Expansion of the WHO health information system;

(l) Financial support to NGOs for tuberculosis and leprosy control programmes and for a course for 10 laboratory technicians on the diagnosis of tuberculosis, held in Jalalabad;

(m) Missions by malaria experts to Afghanistan, provision of anti-malaria drugs, including developing booklets in Pastho and Dari on standard malaria treatment, and provision of bed nets, frames and insecticides for a pilot project for the malaria control programme;

(n) Technical and financial support to Avicenna Pharmaceutical Institution (API) to increase the production of essential drugs by the provision of equipment such as central air conditioning systems, cold chain, refrigerators, etc.;

(o) Technical and administrative support through its experts and technical staff from headquarters and the field offices; several missions in Afghanistan for survey, needs assessment as well as training activities were undertaken.

Positive results have been achieved during this period, despite several obstacles encountered in the implementation of the project mainly in relation to security and funding. Through WHO and international assistance, several thousand Afghans have benefited from the programmes. Several health facilities have been rehabilitated or constructed and are currently adequately equipped with materials, equipment and manpower to cope with an increase in demands of medical services. Many of them are now able to absorb the large influx of returning refugees from the Islamic Republic of Iran and Pakistan.

International Monetary Fund

The main role of IMF is the provision of macroeconomic advice and financial assistance to its members and not emergency humanitarian aid *per se*. As such, the Fund has not been directly involved in the implementation of resolution 47/119 pertaining to emergency assistance to Afghanistan. None the less and despite the fact that security conditions in Afghanistan have impeded normal

Fund involvement, the Fund has been keeping abreast of developments in Afghanistan through direct contacts with Afghan officials and by liaising closely with other multilateral organizations. It has also been providing technical assistance to Afghanistan. Specifically, the Fund staff participated in discussions with senior Afghan officials in Islamabad in November 1992, in the context of a UNDP-sponsored initiative to formulate an inter-agency economic rehabilitation strategy for Afghanistan.

More recently (June 1993), Fund staff reviewed recent economic developments with 7 senior Afghan officials in Islamabad and, at the request of Afghan authorities, conducted an intensive training programme for 13 Afghan officials for about two weeks that focused on concepts and interrelationships of macroeconomic accounts as well as on data compilation in the areas of balance of payments, government finance, and monetary statistics. On that occasion, the Fund staff indicated that the use of resources from the Fund would require a satisfactory data base, in order to prepare a macroeconomic programme, and a strengthened policy implementation capacity of the Government. A further improvement in the security situation would be essential in attaining these objectives. Once this was achieved, the staff would be in a position to carry out the article IV consultation discussions and would use the occasion for a further round of discussions on possible technical assistance and use of Fund resources (under the new Systemic Transformation Facility and/or the Enhanced Structural Adjustment Facility or its successor).

World Meteorological Organization

WMO is concerned with the rehabilitation of the Afghanistan Meteorological Authority, especially the provision of spare parts, consumables for equipment and the training of national meteorologists and hydrologists.

In 1992, WMO provided the Afghanistan Meteorological Authority with funds for its mission to the Russian Federation for spare parts and consumables for its Soviet-made instruments.

In 1993, consideration was given to providing assistance under the Voluntary Cooperation Programme and to sending a sectoral support mission for the rehabilitation of the Afghanistan Meteorological Authority.

International Fund for Agricultural Development

To date, IFAD has no ongoing projects in Afghanistan. However, a project is currently under preparation for Afghanistan, entitled "Afghan Agricultural Rehabilitation and Support Programme". The project, drawn up with technical assistance from the Swedish Committee on Afghanistan, aims at increasing the agricultural production, income and employment levels of 22,000 small-holder farm families through rehabilitation of traditional irrigation systems, provision of agricultural support services and strengthening of the organizational and management capacity of the local institutions. These farm families are mainly returning residents from Pakistan and locally displaced persons affected by war.

The other project being considered and in which IFAD is involved is the "South Khorasan Afghan Refugee Income-Generating Project" in the Islamic Republic of Iran. UNHCR, on the invitation of the Government of the Islamic Republic of Iran, sought the assistance of IFAD in preparing and appraising this project. The project would be located in 14 villages of the Ahangaran Plains in the Qaen district of South Khorasan province, where Afghan refugees are mainly concentrated. Benefits are expected to accrue to about 42,000 persons, of which 35,000 are Afghan refugees (80 per cent) waiting for repatriation. The remaining 7,500 are Iranian nationals.

United Nations Industrial Development Organization

Afghanistan is at a very early stage of industrial development. Even before the outbreak of open hostilities in the late 1970s, the country's manufacturing industry consisted mainly of small-scale enterprises involved in the processing of locally produced agricultural and non-agricultural commodities. Some larger manufacturing units were established during this period, and operated mainly in the public sector. The already narrow industrial base suffered a serious further erosion as a result of the political events of the past 14 years. Most of Afghanistan's manufacturing enterprises in both the public and the private sectors have now ceased to operate or are producing well below capacity because of war damage and shortages of raw materials and spare parts.

The manufacturing sector can make a significant contribution to the task of post-war reconstruction in Afghanistan. Although its overall role in the country's predominantly rural economy will inevitably remain limited for some time to come, it will have an important part to play in supporting the recovery of other sectors. In addition, it will also play an important part in generating employment and income opportunities for the population in general and for many disadvantaged population groups in particular. Some branches of the manufacturing sector, including in particular those involving domestic production activities such as textiles and garments, will also play an important part in absorbing the female labour force. By helping to add value to local production of alternative goods, the rehabilitation of the manufacturing sector will also help to induce a shift from poppy cultivation to other remunerative economic activities.

The rehabilitation needs of the manufacturing sector are wide and varied, and include a number of specific activities, including agricultural processing, the production of textiles and building materials, the rehabilitation of a large State-owned fertilizer plant, and the development and expansion of small-scale engineering and metalworking industries. In developing a framework for this industrial rehabilitation, it is argued that particular priority should be given to industrial projects that are capable of quick implementation: they should help to fulfil the basic needs of Afghan society; increase the availability of consumer goods; employ labour-intensive production methods and appropriate technologies; use a high proportion of domestically produced resources and inputs; supply intermediate goods and raw materials in support of other sectors; support the rehabilitation of other sectors; and have a favourable balance-of-payments impact. In addition, it is suggested that the process of industrial rehabilitation should focus primarily, but not exclusively, on small-scale

activities by private-sector entrepreneurs, and that these activities should be widely dispersed throughout Afghanistan.

In January 1993 the United Nations Office for Rehabilitation Strategy in Afghanistan assigned UNIDO to act as the lead agency in the industry sector and chair the Technical Working Group on Industry. Based on accumulated experience in industrial projects in Afghanistan and participation at three Technical Working Group meetings in Islamabad, UNIDO submitted a draft Action Plan for Immediate Rehabilitation-Industry Sector, dated 9 June 1993. This Action Plan will be included in a comprehensive document to be submitted at a donor's meeting.